TOWN OF BARRINGTON, RHODE ISLAND

This form will be used by any person interested in serving on the various committees of the Town.

Boards and Commissions Application

Name:			
Address: Home:			
Busines	SS:		
Email address: _			
		Office:	
VOLUNTEERING	S SERVICES TO	Name of Committee	
EDUCATION: High School:		City, State	Degree
College:			
Other:			
Name of Compar	ıy	nost recent employment first), City, State	Type of Work
		nittee in Barrington?	
In another comm	unity? Pleas	se list:	
Other volunteer e	experience (name	e of organization, position):	
How long have yo	ou resided in Bar	rington?	
Previous address	5 :		

Please explain briefly your reason(s) for applying for an appointment to this particular committee:
What special talents and experience do you possess which would be useful to the committee?
Would you be representing any organization?
If yes, which one?
THE TOWN OF BARRINGTON DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, RELIGION, AGE OR DISABILITY IN THE EMPLOYMENT OR PROVISION OF SERVICES.
Please be advised that pursuant to Chapter 2 of Title 38 of the Rhode Island General Laws, all the information provided by you to the town in connection with your application for an appointment to a town board/committee is deemed a Public Record subject to disclosure to any person who requests the same.
Applicant's Signature:
Date:
Please be advised that you are subject to the RI Code of Ethics and may be required to file an annual disclosure statement

RETURN THIS FORM TO:TOWN CLERK TOWN HALL, 283 COUNTY ROAD BARRINGTON, RI 02806